

in by the family before sending for me, agrees with me in the opinion that the young man had drank liquor drugged by strychnia, though not in sufficient quantity to destroy life. I am unable to explain the symptoms satisfactorily on any other supposition.

FORT DUNCAN, Eagle Pass, Texas, Feb. 9, 1859.

Inhalation of Chloroform in Intermittents. By S. WHITEHORN, M. D., of Manhattan, K. T.—I am induced, by reading an article in the January number of the *American Journal* concerning the internal use of chloroform in intermittents, to record my brief experience in the same direction.

I have administered chloroform on several occasions to patients shaking violently with an ague chill. In every instance it has stopped the rigors after several inhalations. The feeling of oppression and all pains are simultaneously relieved. Should symptoms recur, I repeat the dose. I hope some of your subscribers, with a more extensive field than mine, will repeat the experiment, and report.

Extraordinary Fecundity. By WM. WOOD, M. D., of East Windsor Hill, Conn.—In the March number of the *Medical and Surgical Reporter* for 1856, I related the case of Mrs. R., who in five consecutive accouchements gave birth to five living children, weighing 62 lbs. 8 oz.—the largest 13 lbs. 10 oz., the smallest 11 lbs. 12 oz. Since then, a case has occurred in my practice which is perhaps still more remarkable. I was called to attend upon Mrs. S., Oct. 22, 1857, when she was delivered of three children, one male and two females. I was again called Oct. 13, 1858, when she was delivered of two male children, making five children in two confinements, in 11 months and 22 days. All would probably have been born alive had it not been for the officiousness of the nurse at the first labour, who said “she found something hanging and thought it ought to come away,” and had actually pulled away 15 inches of the funis before my arrival.

All were born alive except this one. The twins weighed 13 lbs. 4 oz. (6 lbs. 13 oz. and 6 lbs. 7 oz.). The triplets, I regret to say, were not weighed. They were nearly as large as the twins; but calling them only 5 lbs. 8 oz. each, which I am confident is below their true weight, it gives about 30 lbs. of children in less than one year.

DOMESTIC SUMMARY.

Barton's Operation for Straightening the Knee-Joint by Excision of a wedge-shaped bit of Bone.—Dr. J. MASON WARREN recently read before the Boston Society for Medical Improvement a very interesting case of this.

The patient, a man 25 years of age, applied to Dr. W., in September, 1850, “on account of a great deformity of his limb, owing to an ankylosis of the knee-joint, the leg being bent at nearly a right angle with the thigh. He stated that his prospects had been destroyed and his life rendered wretched by his infirmity; and wished, if anything could be done for him short of extreme danger to his life, that it should be attempted. The history of the case, as given by him, was this. In November, 1841, he fell a distance of three feet, striking the knee. Three days after the fall, the knee began to swell and become painful. This went on for four weeks, when it was punctured, and a pint of watery fluid escaped. It continued to discharge for fifteen months, during which time many small pieces of bone came away. The opening finally healed—leaving the joint and limb in its present distorted position. His hereditary tendencies were

scrofulous. In the erect position, resting upon the sound limb, the lame foot is seven and a half inches from the ground, but he can limp about with a high-heeled boot.

"I informed the patient that the only operation which suggested itself to me was Barton's operation, which had apparently been already described to him, and at once he requested to have it performed. I advised him to enter the hospital for the convenience of apparatus, which he did. Some of his friends attempted to deter him from running any risk, but he said he was determined either to undergo the operation, suggested by me, or to have the limb removed, as he could no longer bear the pain and mortification of his condition.

"On the second of October, the operation agreed upon was thus performed. A V-shaped incision was made through the skin just above the knee-joint, the base of the triangle, two inches wide, presenting outward, with the apex at the inner side of the limb. The flap was dissected up and the bone exposed, the other textures having become atrophied from disease. A wedge-shaped piece was sawn out of the femur, the incisions not being carried quite through, so as to avoid the artery. The remaining portion of bone was then broken; the flap was secured in its place, and the knee placed on a double inclined plane, and firmly fixed to it. There was no hemorrhage.

"On the following day, the patient said he had passed a restless night, but was free from pain. The limb was dressed on October 7th, and placed on a splint with a hinge and screw, so that it could be extended without any shock to the joint. By the 20th, the limb had been gradually brought to a straight position, and on the 29th the bones had united, and the wound was healed. Some time after this, he had a febrile attack, in the course of which the union became somewhat less firm, and threatened to dissolve; the system showing its scrofulous tendency. He gradually recovered, however, and left the hospital.

"About a year after his discharge, this gentleman presented himself to me, well. The limb was but very little shorter than the other, and with a pair of large trowsers the difference in the shape of the two limbs could scarcely be distinguished. He walked well with a cane, and the improvement between his present upright appearance in walking and his former painful method of locomotion would have almost prevented him from being recognized as the same individual.

"In a recent conversation with Dr. Barton—whose retirement from the profession in which he acquired so much honour is deeply to be regretted—he informed me that when he first began these operations, great danger was apprehended from the supposed interference with joints, or their vicinity. But he at once demonstrated what afterward seemed sufficiently evident, that the delicate structure of the joint had, in these cases, already been destroyed, and that the bones might as readily be interfered with at this point as in their continuity. In some cases greater symmetry may be gained by making the excision directly from the joint rather than above it, as there is then presented a much larger surface of bone. There are also other advantages. I have seen a patient thus operated upon, by Professor Mütter, with the most complete and gratifying success. Dr. Buck, of New York, has also done the operation successfully.—*Boston Med. and Surg. Journ.*, Dec. 23, 1858.

Diabetes.—Dr. ALONZO CLARK called the attention of the New York Medical and Surgical Society to the history of two cases of diabetes, "in which he had resorted to a somewhat novel method of treatment with apparent benefit. The first case was that of a physician, aged 62, residing in the central part of the State of New York. He had naturally a robust constitution, and when in health had an average weight of 220 lbs. He stated that for the past forty years he had been actively engaged in the practice of his profession, and that he had enjoyed uninterrupted health until last spring, when his suspicions were excited by the occurrence of frequent micturition, accompanied with an increase in the amount of urine passed. He examined some of his urine, and detected the presence of sugar, fermentation taking place readily when the fluid was allowed to stand in a warm room. Its specific gravity was 103. Gradually he grew worse, muscular power being considerably diminished, and during the months of June